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PTO/SB/21 (05-03)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/513,005	
	Filing Date	02/25/2000	
	First Named Inventor	Bedingfield	
	Art Unit	Not Assigned	
	Examiner Name	Not Assigned	
Total Number of Pages in This Submission	3	Attorney Docket Number	0201-99018

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Signature	<i>Nora M. Tocups</i>
Date	6/18/03

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Signature	<i>Nora M. Tocups</i>	Date	6/18/03

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PTO/SB/81 (02-01)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/513,005
Filing Date	2-25-00
First Named Inventor	Bedinafield
Title	Region wide messaging system and methods including
Group Art Unit	Not Assigned
Examiner Name	Not Assigned
Attorney Docket Number	99018 US

I hereby appoint:

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Nora M. Tocups	35,717
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☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Jacqueline Gregorski, VP Patent Trademark Procurement, BellSouth Intellectual Property Corporation.

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/513,005
Filing Date	2-25-00
First Named Inventor	Bednarski
Group Art Unit	Not Assigned
Examiner Name	Not Assigned
Attorney Docket Number	99018 US

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☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Jacqueline Gregorski VP Patent Trademark Procurement BellSouth Intellectual Property Corp.

Signature

Jacqueline Gregorski

Date

5-22-03

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